TY NAME: BASF Corp.				
TY ID (PREMISE NUMBER):	: 02-47-04-0195			
TY ADDRESS: 120 Pine Str	reet, Elyria, OH 44035			
e or most recent modificatio	n date: 07/27/01			
ERLY Reporting Period			SEMIANNUAL Reporting Period (please indicate AN/A@ below in the AFro fields if this report does include semiannual deviation reporting)	
NA	To: NA	From: 07/01/14	To: 1	2/31/14
ages in <u>report,</u> including this	one: 60 pages			
list any supporting attachme	nts			
ng deadline: 01/31/2015				

NOTE: The deviation reporting period shall be stated in the following format: Axx/xx/xx through zz/zz/zz@ where xx/xx/xx and zz/zz/zz are the beginning and end dates for the deviation reporting period respectively.

SIGNATURE FOR STATEMENT

This statement shall be signed by the responsible official as defined in OAC rule 3745-77-01(GG). Making of any false material statement, representation or certification constitutes

a violation of ORC 3704.05(H), and subjects the responsible party signing this statement to civil and/or criminal penalties as provided in ORC 3704.06(C) and ORC 3704.

CERTIFICATION

Based on information and belief formed after reasonable inquiry, I hereby affirm, as stated in OAC rule 3745-77-03(D), that the statements and information as transmitted in this

Title V report are true, accurate and complete to the best of my knowledge.

Authorized Signature	Date	
Name (Please Print)	Title	_
Ohio Environmental Protection Agency Section I- Page 2 Deviation Reporting		
ACILITY NAME: BASF Corp.		
ACILITY ID (PREMISE NUMBER): 02-47-04-0195		
ACILITY ADDRESS: 120 Pine Street, Elyria, OH 44035		
ssuance or most recent modification date: 07/27/01		
QUARTERLY Reporting Period	SEMIANNUAL Reporting Period (please report does include semiannual deviation	indicate "N/A" below in the "From" and "To" fields if the reporting)
rom: NA To: NA	From: 07/01/14	To: 12/31/14
Reporting deadline: 01/31/15		

Ohio Environmental Protection Agency Deviation Reporting

FACILITY NAME			
FACILITY ID (PREMISE NUME	BER)		
FACILITY ADDRESS			
Issuance or most recent modification date			
QUARTERLY Reporting Period		SEMIANNUAL Reporting Period (please in this report does include semiannual deviation)	
From:	То:	From:	То:
Reporting deadline			

SECTION I -

704.05(H), PART I General Terms and Conditions (Permit Requirement Reporting) (Table1)

Mark the following box with an >X= if no General Terms and Conditions deviations occurred

THERE WERE NO DEVIATIONS OF ANY OF THE TERMS AND CONDITIONS OF PART I OF THE TITLE V PERMIT DURING THE REPORTING PERIOD

Add rows as necessary to the following table for reported deviations (one for each General Term as applicable; see detailed instructions for more information) (Table2)

·			·			·		
PERMIT RM scription	Reporting Requirement (choose one)		ACTUAL METHOD USED TO		DEVIATION INFORMATIC	PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIOI PREVENTATIVE MEASURE	
Quarterly Semi- Annual		1 1		DEVIATION DURATION				DESCRIPTION AND MAGNITUDE OF THE DEVIATION
				DATE / TIME START	DATE / TIME END			

TVDEVIATIONV1.DOC 11/2005

Ohio Environmental Protection Agency Deviation Reporting

FACILITY NAME			
FACILITY ID (PREMISE NUME	BER)		
FACILITY ADDRESS			
Issuance or most recent modification date			
QUARTERLY Reporting Period		SEMIANNUAL Reporting Period (please in this report does include semiannual deviation)	
From:	То:	From:	То:
Reporting deadline			

PERMIT RM scription	Reporting Requirement DETERMINE COMPLIANCE			DEVIATION INFORMATIO	PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTION PREVENTATIVE MEASURE		
·	Quarterly Semi- Annual			DEVIATION DURATION		DESCRIPTION AND MAGNITUDE OF THE DEVIATION		
				DATE / TIME START	DATE / TIME END			

Ohio Environmental Protection Agency Section II- Page 1

Doviction	Reporting	
Deviation	Reporting	

FACILITY NAME: BASF Corp).		
FACILITY ID (PREMISE NUM	BER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pir	ne Street, Elyria, OH 44035		
Issuance or most recent modif	fication date: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Baserting Bas	ried (places indicate 3 N/A () below in the 3 Fr
QUARTERLY Reporting Perio	OCI	· · · · · ·	riod (please indicate AN/A@ below in the AFr de semiannual deviation reporting)
QUARTERLY Reporting Period From: NA	To: NA	· · · · · ·	,.

<u>Section II - Part II Facility-wide Permit Requirement Reporting</u> Insignificant Emissions Unit Negative Declarations (Table1)

List each insignificant emissions unit where no deviations of any PTI terms or applicable requirements for the listed emissions unit occurred, or add rows as necessary to the deviation reporting table (see next page) for reported deviations (one for each term as applicable; see detailed instructions for more information)

VERE NO DEVIATIONS OF <u>ANY</u> PTI TERMS OR APPLICABLE REQUIREMENTS FOR THE FOLLOWING LISTED INSIGNIFICANT EMISSIONS UNITS IDENTIFIED IN PART II., LE V PERMIT:

color tray dying (E-5)

trays dryers, littleford mixer (E-31)

HC-11 tanks (E-53)

general catalyst dryers #4, #5 (E-86)

nitric acid dilution (E-87)

ZR sinter furnace (E-89)

FACILITY NAME: BASE C	orp.		
FACILITY ID (PREMISE N	UMBER): 02-47-04-0195		
FACILITY ADDRESS: 120	Pine Street, Elyria, OH 44035		
Issuance or most recent me	odification date: 07/27/01		
QUARTERLY Reporting P	eriod		iod (please indicate AN/A@ below in the AFr de semiannual deviation reporting)
From: NA	To: NA	From: 07/01/14	To: 12/31/14
Reporting deadline: 01/31/			

VERE NO DEVIATIONS OF ANY PTI TERMS OR APPLICABLE REQUIREMENTS FOR THE FOLLOWING LISTED INSIGNIFICANT EMISSIONS UNITS IDENTIFIED IN PART II. I LE V PERMIT:

ammonia stripper in WWTP (E-93)

12 inch rotary calciner (E-95)

reduction towers (E-98)

#6 rotary calciner (E-97)

Horne tableting machines (E-102)

sulfuric acid storage tank

Kewanee boiler, rated at 8.6 MMBtu/hr

Kewanee boiler, rated at 8.6 MMBtu/hr

Kewanee boiler, rated at 8.6 MMBtu/hr

<u> </u>			
FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER):	02-47-04-0195		
FACILITY ADDRESS: 120 Pine Stre	et, Elyria, OH 44035		
Issuance or most recent modification	date: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Period fields if this report does include	d (please indicate AN/A@ below in the AFr semiannual deviation reporting)
From: NA	To: NA	From: 07/01/14	To: 12/31/14
Reporting deadline: 01/31/2015			·

VERE NO DEVIATIONS OF ANY PTI TERMS OR APPLICABLE REQUIREMENTS FOR THE FOLLOWING LISTED INSIGNIFICANT EMISSIONS UNITS IDENTIFIED IN PART II. I LE V PERMIT:

Kewanee boiler, rated at 8.6 MMBtu/hr

Ohio Environmental Protection Agency Section II- Page 2

Deviation Reporting

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUME	3ER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pin	ne Street, Elyria, OH 44035		
Issuance or most recent modifi	ication date: 07/27/01		
QUARTERLY Reporting Period	d	SEMIANNUAL Reporting Period (please indicate AN/A fields if this report does include semiannual deviation in	
From: NA	To: NA	From: 07/01/14	To: 12/31/14
Reporting deadline: 01/31/15			•

<u>Facility-wide Permit Requirements Terms and Conditions (Permit Requirement Reporting) - Negative Declarations (mark with an >X= if applicable)</u> (Table 2)

THERE WERE NO DEVIATIONS OF ANY OF THE TERMS AND CONDITIONS OF PART II OF THE TITLE V PERMIT DURING THE REPORTING PERIOD SPECIFIED IN THIS REPORT

Section II - Part II Facility-wide and/or IEU permit requirement (Permit Requirement Reporting) - Deviation Reporting (Table 3)

Add rows as necessary to the following table for reported deviations (one for each Term as applicable; see detailed instructions for more information)

r IEU T	Reporting Requirement (choose one) ion or both		ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATION		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	DEVIATION VERBAL W ATTRIBUTABLE REPORT(S) RE TO A DATE(S) D MALFUNCTION (If no reports were made, state ANO REPORTS@ in stat	MALFUN WRIT REPOF DATE	
s for					ATION ATION	DESCRIPTION AND MAGNITUDE OF THE	? (Yes or No - If Yes, continue to	(If no reports state ANO R in the spac			
				DATE / TIME START	DATE / TIME END	DEVIATION			the next column)		

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER):	02-47-04-0195		
FACILITY ADDRESS: 120 Pine Str	eet, Elyria, OH 44035		
Issuance or most recent modification	n date: 07/27/01		
•		· •	riod (please indicate AN/A@ below in the AFr de semiannual deviation reporting)
From: NA To: NA		From: 07/01/14	To: 12/31/14
Reporting deadline: 01/31/15			

r IEU T iption is for	Reporting Requirement USED TO INFORMATION (choose one) DETERMINE or both COMPLIANCE				PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALFUN WRIT REPOF DATE		
	Quarterly	Semi- Annual			ATION ATION	DESCRIPTION AND MAGNITUDE OF THE			MALFUNCTION ? (Yes or No - If Yes, continue to	(If no reports were made, state ANO REPORTS@ in the space below)	(If no reports state ANO R in the space
				DATE / TIME START	DATE / TIME END	DEVIATION			the next column)		

Ohio Environmental Protection Agency Section III- Page 1

Deviation Reporting

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER):	02-47-04-0195		
FACILITY ADDRESS: 120 Pine Str	eet, Elyria, OH 44035		
Issuance or most recent modification	n date: 07/27/01		
QUARTERLY Reporting Period			od (please indicate AN/A@ below in the AFroe semiannual deviation reporting)
From: NA To: NA		From: 07/01/14	To: 12/31/14
Reporting deadline: 01/31/2015			

Section III - Part III Emissions Unit Terms and Conditions (Permit Requirement Reporting) - Negative Declarations (Table 1)

List each emissions unit where no deviations of any terms for the listed emissions unit occurred, or add rows as necessary to the second table (see next page) for reported deviations (one for each term as applicable; see detailed instructions for more information)

VERE NO DEVIATIONS OF ANY OF THE TERMS AND CONDITIONS OF PART III OF THE TITLE V PERMIT FOR THE FOLLOWING LISTED EMISSIONS UNITS:

Emissions Unit ID	Please place an >X= below if there were no Quarterly Deviations - If an >X= is not indicated, the deviation(s) must be identified in Table2 below	If applicable, please place an >X= below if there no Semiannual Deviations - If an >X= is not inditine the deviation(s) must be identified in Table2 b
	X	X
	X	X
		Х
		X

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUME	3ER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pin	ne Street, Elyria, OH 44035		
Issuance or most recent modifi	cation date: 07/27/01		
QUARTERLY Reporting Perior	d	· · · · ·	od (please indicate AN/A@ below in the AFroe semiannual deviation reporting)
From: NA	To: NA	From: 07/01/14	To: 12/31/14
Reporting deadline: 01/31/201	5		·

	X
	X
X	X
X	X
X	X
Х	Х
Х	Х
X	Х
X	X

FACILITY NAME: BASF Corp.

FACILITY ID (PREMISE NUMBER): 02-47-04-0195 FACILITY ADDRESS: 120 Pine Street, Elyria, OH 44035 Issuance or most recent modification date: 07/27/01 QUARTERLY Reporting Period From: NA To: NA Reporting deadline: 01/31/2015 X X			
QUARTERLY Reporting	Period	· _ · _ ·	g Period (please indicate AN/A@ below in the AFronclude semiannual deviation reporting)
From: NA	To: NA	From: 07/01/14	To: 12/31/14
Reporting deadline: 01/3	31/2015		
	X		X
	X		X
			X
	X		X
			X
	X		X
			X
	X		X

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Х

Х

Х

FACILITY NAME: BASF	Corp.			
FACILITY ID (PREMISE	NUMBER): 02-47-04-0195			
QUARTERLY Reporting Period				
Issuance or most recent modification date: 07/27/01				
QUARTERLY Reporting Period From: NA To: NA	Period	SEMIANNUAL Reporting fields if this report does		dicate AN/A@ below in the AFro
From: NA	To: NA	From: 07/01/14	From: 07/01/14	
Reporting deadline: 01/31/2015				
		,		
	X		Х	
	X		X	
			Х	
	X		Х	
	X		Х	
	X		Х	
			1	

Х

Χ

Χ

FACILITY NAME: BASE (Corp.		
FACILITY ID (PREMISE N	NUMBER): 02-47-04-0195		
FACILITY ADDRESS: 12	0 Pine Street, Elyria, OH 44035		
Issuance or most recent m	nodification date: 07/27/01		
QUARTERLY Reporting F	Period		od (please indicate AN/A@ below in the AFrom semiannual deviation reporting)
From: NA To: NA		From: 07/01/14	To: 12/31/14
Reporting deadline: 01/31/2015			
	I	From: 07/01/14	To: 12/31/14

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Ohio Environmental Protection Agency Section III- Page 2

Deviation Reporting

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): 02	2-47-04-0195		
FACILITY ADDRESS: 120 Pine Street	ί, Elyria, ΟΗ 44035		
Issuance or most recent modification d	ate: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Perior	od
From: NA	To: NA	From: 07/01/14	To: 12/31/14
Reporting deadline: 01/31/2015			

Section III - Part III Emissions Unit Terms and Conditions (Permit Requirement Reporting) - Deviation Reporting (Table2)

Add rows as necessary to the following table for reported deviations (one for each Term as applicable; see detailed instructions for more information) - Please group deviations for each emissions unit that has deviations of multiple terms.

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choo	Requirement se one) both	ACTUAL METHOD USED TO DETERMINE COMPLIANCE			INFORMATION CAUS	PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	DEVIATION VERBAL ATTRIBUTABLE REPORT(S) TO A DATE(S)	REPORT(S) DATE(S)	MALI W RE: D
	ļ	Quarterly Semi- Annual	Semi- Annual		DEVIATION DURATION		DESCRIPTION AND			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the	(If r we sta REP
					DATE/TIME START	DATE/TIM E END	MAGNITUDE OF THE DEVIATION			the next column)	space below)	the s
	No semiannual report deviations											

See page 3 of the instructions ASECTION III ADDITIONAL DETAILED INSTRUCTIONS FOR COMPLETING A DEVIATION REPORTING TABLE@ for guidance on this table.